



CA CERTIFIED PUBLIC HEALTH LAB #335637
CLIA #05D1066369

COUNTY OF LOS ANGELES
DEPARTMENT OF PUBLIC HEALTH

PUBLIC HEALTH LABORATORY
12750 ERICKSON AVENUE
DOWNEY, CA 90242
PHONE (562) 658-1300
FAX (562) 401-5999

PLACE BARCODE LABEL HERE

DIVISION OF HIV AND STD PROGRAMS
TEST REQUEST FORM

PATIENT NAME (LAST, FIRST)				DATE COLLECTED (mm/dd/yyyy)		TIME COLLECTED (hh:mm tt)	
PATIENT ADDRESS				SUBMITTER/CLINIC CODE/ADDRESS			
				Other (Specific) _____			
PATIENT/PARTICIPANT MRN#		M	F	OTHER	DATE OF BIRTH (mm/dd/yyyy)		SPECIMEN SOURCE
REQUESTING PHYSICIAN		PHYSICIAN #		DATE/TIME RECEIVED (FOR LAB USE ONLY)			
ELIGIBILITY CERTIFICATION / PROGRAM ACCOUNT							
<input type="checkbox"/> RYAN WHITE AOM PATIENT: I CERTIFY THIS CLIENT HAS AN ANNUAL ADJUSTED GROSS INCOME OF LESS THAN \$50,000 AND DOES NOT HAVE MEDICAL, MEDICARE, OR OTHER THIRD PARTY INSURANCE. CITY/COUNTY INDIGENT PROGRAMS DO NOT FALL UNDER THE CATEGORY OF THIRD PARTY INSURANCE. <input type="checkbox"/> YES INITIALS: _____ DATE: _____							
<input type="checkbox"/> POST-EXPOSURE PROPHYLAXIS PROGRAM (PEP) - <i>approved sites only</i> <input type="checkbox"/> OTHER (SPECIFY) _____							
TEST REQUEST							
TEST		SPECIMEN TYPE / REQUIREMENTS			SPECIMEN STORAGE/TRANSPORT		
<input type="checkbox"/> QUANTIFERON GOLD IN-TUBE		COLLECT 3 SPECIMENS BY VENIPUNCTURE CONTAINING 1 ML BLOOD EACH: QFT-NIL CONTROL (GRAY), QFT-TB ANTIGEN (RED), QFT-MITOGEN (PURPLE) SPECIMENS ARE SHAKEN AND CLIENT INCUBATED AT 37° +/- 1°C FOR 16-24 HOURS BEFORE TRANSPORT			TRANSPORT AT ROOM TEMP. SPECIMENS MUST BE RECEIVED AT THE LAB THE SAME DAY FOR PROCESSING. INCUBATION AND SPECIMEN LOG TRACKING SHEET MUST BE INCLUDED WITH SPECIMEN DELIVERY.		
<input type="checkbox"/> HIV1/2 Ag/Ab SCREENING		<input type="checkbox"/> SERUM OR PLASMA – A MINIMUM OF 3ML OF EITHER SPECIMEN IS REQUIRED FOR HIV ANTIGEN/ANTIBODY SCREENING, HIV1, HIV2 DIFFERENTIATION, AND HIV-1 QUALITATIVE RNA NAAT <input type="checkbox"/> ORAL FLUID – ORAL FLUID TESTING FOR HIV-1 ANTIBODIES REQUIRES THE ORASURE® HIV-1 SPECIMEN COLLECTION DEVICE. A MINIMUM OF 0.75 ML ORAL FLUID IS REQUIRED FOR ANTIBODY SCREENING AND WESTERN BLOT			TRANSPORT SERUM OR PLASMA TUBES AT 2-8°C ORAL FLUID SPECIMENS MAY BE TRANSPORTED AT ROOM TEMPERATURE		
<input type="checkbox"/> HIV-1 VIRAL LOAD		<input type="checkbox"/> PLASMA – VIRAL LOAD SPECIMEN MINIMUM IS 3ML. SUBMIT 5 ML IF ALSO ORDERING HIV-1 RESISTANCE GENOTYPING INITIAL VIRAL LOAD AT THIS CLINIC? <input type="checkbox"/> YES <input type="checkbox"/> NO			COLLECT SPECIMEN IN K2 EDTA TUBE. CENTRIFUGE AT 800-1600 X G FOR 20 MIN AT ROOM TEMP. TRANSFER PLASMA TO STERILE POLYPROPYLENE TUBE. LABEL AS PLASMA. FREEZE AND DELIVER TO LAB FROZEN.		
<input type="checkbox"/> HIV-1 RESISTANCE (GENOTYPING) MOST RECENT VIRAL LOAD (CP/ML OR LOG): _____ DATE: _____		<input type="checkbox"/> PLASMA – RESISTANCE GENOTYPING SPECIMEN REQUIRES 2 ML MINIMUM VOLUME. SUBMIT 5 ML IF TESTING TO BE COMBINED WITH VIRAL LOAD. SPECIMEN MUST HAVE A VIRAL LOAD OF ≥ 2000 CP/ML			COLLECT SPECIMEN IN K2 EDTA TUBE. CENTRIFUGE AT 800-1600 X G FOR 20 MIN AT ROOM TEMP. TRANSFER PLASMA TO STERILE POLYPROPYLENE TUBE. LABEL AS PLASMA. FREEZE AND DELIVER TO LAB FROZEN.		
<input type="checkbox"/> C. TRACHOMATIS / N. GONORRHOEAE NAAT (RECTAL, URETHRAL, VAGINAL, ENDOCERVICAL, URINE) <input type="checkbox"/> N. GONORRHOEAE NAAT (THROAT ONLY) <input type="checkbox"/> TRICHOMONAS VAGINALIS NAAT (ENDOCERVICAL, VAGINAL, AND FEMALE URINE ONLY)		<input type="checkbox"/> URINE – COLLECT A MINIMUM OF 2ML URINE WITH APTIMA URINE SPECIMEN COLLECTION KIT (YELLOW) <input type="checkbox"/> RECTAL – COLLECT WITH APTIMA VAGINALSWAB SPECIMEN COLLECTION KIT (ORANGE) <input type="checkbox"/> VAGINAL – COLLECT WITH APTIMA VAGINALSWAB SPECIMEN COLLECTION KIT (ORANGE) <input type="checkbox"/> THROAT- COLLECT WITH APTIMA VAGINAL SWAB SPECIMEN COLLECTION KIT (ORANGE) <input type="checkbox"/> ENDOCERVICAL/MALE URETHRAL – COLLECT WITH APTIMA UNISEX COLLECTION KIT (PURPLE)			STORE COLLECTION KITS AT 15-30°C STORE AND TRANSPORT SPECIMENS AT 2-30°C LABEL COLLECTION TUBE WITH SPECIMEN SOURCE AND SEND TO LABORATORY AS SOON AS POSSIBLE FOR TESTING		